

PLANNING WORKSHEET

CLIENT(S):

APPOINTMENT DATE:

ANNUAL INCOME UPDATE

TOTAL(S)

| | | |
|------------------|----------|----------|
| CLIENT | \$ _____ | |
| SPOUSE | \$ _____ | |
| OTHER 1 (SOURCE) | \$ _____ | |
| OTHER 2 (SOURCE) | \$ _____ | \$ _____ |

CURRENT ASSETS UPDATE

| | | |
|--|----------|----------|
| CASH RESERVES | \$ _____ | |
| CD'S, MONEY MARKETS, MUTUAL FUNDS, ETC | \$ _____ | |
| IRA TAX-DEFERRED ACCOUNT(S) | \$ _____ | |
| EMPLOYER RETIREMENT PLAN(S)/401K, 403B | \$ _____ | |
| OTHER ASSETS (HOME, PROPERTY, ETC) | \$ _____ | \$ _____ |

CURRENT LIABILITIES UPDATE

| | | |
|--|----------|----------|
| PRIMARY MORTGAGE | \$ _____ | |
| HOME EQUITY LOAN OR CREDIT LINE | \$ _____ | |
| VEHICLE LOAN | \$ _____ | |
| OTHER DEBT (CREDIT CARD, PERSONAL LOAN, ETC) | \$ _____ | \$ _____ |

NET WORTH UPDATE (TOTAL ASSETS – TOTAL LIABILITIES) \$ _____

GOALS UPDATE

1. IS THERE A SPECIFIC AREA(S) OF YOUR PERSONAL FINANCIAL PLANNING THAT YOU WOULD LIKE TO DISCUSS DURING YOUR REVIEW?

- | | |
|--|---|
| <input type="checkbox"/> FINANCIAL POSITION (CASH FLOW, CASH RESERVES) | <input type="checkbox"/> PORTFOLIO ASSET ALLOCATION |
| <input type="checkbox"/> RETIREMENT PLANNING (PROGRESS UPDATE) | <input type="checkbox"/> INCOME TAX PLANNING |
| <input type="checkbox"/> PROTECTION (HEALTH, LIFE, DISABILITY, LTC) | <input type="checkbox"/> ESTATE PLANNING |

2. HAVE THERE BEEN ANY CHANGES IN YOUR PERSONAL FINANCIAL PLANNING SITUATION?

- YES _____ NO

3. ARE THERE ANY MAJOR EXPENDITURES IN THE NEXT 12 MONTHS WHICH WILL AFFECT YOUR FINANCIAL PLANNING?

- YES _____ NO

4. OTHER/MISCELLANEOUS ISSUES OF INTEREST: